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**APPLICANTS**  
 Richard Marion Czerwec, Raleigh, NC;  
 Richard Roger Rzonca, Raleigh, NC;  
 Marlin V. Simmering, Clayton, NC;  
 Geert Van Wonterghem, Eeklo, BELGIUM;  
 Jan De Groote, Berchem, BELGIUM;

**\*\* CONTINUING DATA \*\*\*\*\***

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED**  
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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	<b>STATE OR COUNTRY</b> NC	<b>SHEETS DRAWING</b> 13	<b>TOTAL CLAIMS</b> 1	<b>INDEPENDENT CLAIMS</b> 1
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature _____ Initials _____				

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**TITLE**  
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